

ISSUE SLIP/STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID/NO	DATE
FEE DETERMINATION	<i>[Handwritten]</i>		<i>[Handwritten]</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>A-S</i>	<i>943</i>	<i>9-7-1</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

Rejected: N
 Allowed: I
 (Through numeral): Canceled: A
 Restricted: O
 Non-elected: Interference
 Appeal: Objected

Claim	Date	Claim	Date	Claim	Date
1		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
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11		61		111	
12		62		112	
13		63		113	
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28		78		128	
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36		86		136	
37		87		137	
38		88		138	
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42		92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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